



KENTUCKY DEPARTMENT OF AGRICULTURE

A Consumer Protection And Service Agency • Richie Farmer, Commissioner

Office of the State Veterinarian, Robert C. Stout, DVM • www.kyagr.com

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RESPONSIBILITIES OF THE MARKET VETERINARIAN

- Visually inspect all livestock for clinical evidence for contagious, infectious, communicable, or parasitic diseases.
- Supervise the collection of required blood samples. Shall submit blood samples to state/federal laboratory for confirmation testing and shall insure samples are of quantity and quality needed for confirmation testing. Samples must be received without hemolysis or serum samples only may be required, especially during weather extremes. A clean, sterile, dry needle and syringes shall be used for each animal. However, sterile dry individual "California" bleeding needles, etc. are acceptable.
- The market veterinarian shall identify all test eligible animal(s) by an approved official ear tag, tattoo, or brand. Official identification shall be complete and shall be recorded on the official stockyard test record.
- The market veterinarian shall verify that all test eligible animal(s) are identified with an official back tag and said back tag shall be recorded on the official stockyard test record. Provide the purchaser or shipper of livestock with the proper Certificate of Veterinary Inspection required for interstate movement of animals.
- Assist state/federal personnel and stockyard personnel in evaluating all livestock (*age, vaccination status, presence of disease, etc.*) as to compliance with state/federal regulations.
- Perform calfhood vaccination when required and shall be responsible for determining the age eligibility of females presented for vaccination.
- Report the presence of a reportable, communicable disease to the chief livestock health official.
- Cooperate with stockyard management and state/federal personnel in carrying out all applicable state/federal laws and regulations governing the sale and movement of livestock.

PLEASE TURN TO REVERSE SIDE TO COMPLETE APPROVAL FORM

I, _____ hold a valid Kentucky License, KY License # _____, and Accreditation # _____, to practice veterinary medicine in Kentucky. I acknowledge receipt of 302 KAR 20:070 (Stockyard Regulation), and I acknowledge that failure to comply with applicable laws and regulations may constitute action for withdrawal of approval as the market veterinarian, and may constitute an accreditation violation in accordance with the provisions of CFR Part 161, Title 9.

Market Veterinarian	Date	Name of Stockyard
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REQUEST APPROVAL:

Stockyard Owner	Date	Mailing Address		
		City	State	Zip

APPROVAL GRANTED:

State Veterinarian Division of Animal Health Kentucky Department of Agriculture	Date of Signature
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